



PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket No. NIL-176 (80006-176)										
<div style="display: flex; justify-content: space-between;"><div>In re Application of: Tsutomu Watada et al.</div></div> <div style="display: flex; justify-content: space-between;"><div>Application Number 10/092,493-Conf. #1276</div><div>Filed March 8, 2002</div></div> <div style="text-align: center; padding: 5px;">For: POSITIONING METHOD AND POSITIONING STRUCTURE OF INHIBITOR SWITCH</div> <div style="display: flex; justify-content: space-between;"><div>Art Unit 2833</div><div>Examiner R. S. Luebke</div></div>												
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <table style="width: 100%; border: none;"><tr><td style="width: 60%;"><input type="checkbox"/> One month (37 CFR 1.17(a)(1))</td><td style="width: 40%; text-align: right;">\$ _____</td></tr><tr><td><input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td><td style="text-align: right;">\$ 420.00</td></tr><tr><td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td><td style="text-align: right;">\$ _____</td></tr><tr><td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td><td style="text-align: right;">\$ _____</td></tr><tr><td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td><td style="text-align: right;">\$ _____</td></tr></table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____.</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>18-0013</u>.</p> <p>I have enclosed a duplicate copy of this sheet.</p> <p>I am the <input type="checkbox"/> applicant/inventor.</p> <p style="margin-left: 40px;"><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p style="margin-left: 40px;"><input type="checkbox"/> attorney or agent of record. Registration Number _____</p> <p style="margin-left: 40px;"><input checked="" type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) <u>24,104</u></p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"><div style="width: 45%;"><p><u>April 14, 2004</u> Date</p><p><u>(202) 955-3750</u> Telephone Number</p></div><div style="width: 45%; text-align: center;"><p>_____ Signature</p><p>Ronald P. Kananen Typed or printed name</p></div></div> <p style="font-size: small;">NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below</p>			<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ _____	<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$ 420.00	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$ _____	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$ _____	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$ _____
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ _____											
<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$ 420.00											
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$ _____											
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$ _____											
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$ _____											
<div style="display: flex; align-items: center;"><input type="checkbox"/> Total of <u>1</u> forms are submitted.</div>												

04/15/2004 AHONDAF1 00000037 180013 10092493

01 FC:1252 420.00 DA